

ISSUE CLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		12/01/94
O.I.P.E. CLASSIFIER		10	12/17/94
FORMALITY REVIEW		68904	12/22/99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/01/94
2	✓	✓	12/01/94
3	✓	✓	12/01/94
4	✓	✓	12/01/94
5	✓	✓	12/01/94
6	✓	✓	12/01/94
7	✓	✓	12/01/94
8	✓	✓	12/01/94
9	✓	✓	12/01/94
10	✓	✓	12/01/94
11	✓	✓	12/01/94
12	✓	✓	12/01/94
13	✓	✓	12/01/94
14	✓	✓	12/01/94
15	✓	✓	12/01/94
16	✓	✓	12/01/94
17	✓	✓	12/01/94
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25	✓	✓	12/01/94
26	✓	✓	12/01/94
27	✓	✓	12/01/94
28	✓	✓	12/01/94
29	✓	✓	12/01/94
30	✓	✓	12/01/94
31	✓	✓	12/01/94
32	✓	✓	12/01/94
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42	✓	✓	12/01/94
43	✓	✓	12/01/94
44	✓	✓	12/01/94
45	✓	✓	12/01/94
46	✓	✓	12/01/94
47	✓	✓	12/01/94
48	✓	✓	12/01/94
49	✓	✓	12/01/94
50	✓	✓	12/01/94

Claim	Final	Original	Date
51	✓	✓	12/01/94
52	✓	✓	12/01/94
53	✓	✓	12/01/94
54	✓	✓	12/01/94
55	✓	✓	12/01/94
56	✓	✓	12/01/94
57	✓	✓	12/01/94
58	✓	✓	12/01/94
59	✓	✓	12/01/94
60	✓	✓	12/01/94
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62	✓	✓	12/01/94
63	✓	✓	12/01/94
64	✓	✓	12/01/94
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76	✓	✓	12/01/94
77	✓	✓	12/01/94
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87	✓	✓	12/01/94
88	✓	✓	12/01/94
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90	✓	✓	12/01/94
91	✓	✓	12/01/94
92	✓	✓	12/01/94
93	✓	✓	12/01/94
94	✓	✓	12/01/94
95	✓	✓	12/01/94
96	✓	✓	12/01/94
97	✓	✓	12/01/94
98	✓	✓	12/01/94
99	✓	✓	12/01/94
100	✓	✓	12/01/94

Claim	Final	Original	Date
110			
112			
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If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)